## PCT

## REQUEST

For receiving Office use only	
International Application No.	
International Filing Date	
Name of receiving Office and "PCT International Applicati	

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.	Name of receiving Office	ce and "PCT International Application"	
	Applicant's or agent's f	ile reference rs maximum) S 0 4 P 0 0 4 7 W 0 0 0	
Box No. I TITLE OF INVENTION CLOCK CONT			
ELECTRONIC APPARATUS AND CLOCK CONTROL PROGRAM	CONTROL METH	OD AS WELL AS CLOCK	
	n is also inventor		
Name and address: (Family name followed by given name; for a legal en The address must include postal code and name of country. The country of Box is the amplicant's State (that is country) of residence if no State of residen	Telephone No. 03-5448-2111		
7-35, Kitashinagawa 6-chome,		Facsimile No. 03-5448-2244	
		Teleprinter No.	
		Applicant's registration No. with the Office	
State (that is, country) of nationality:  JAPAN	State (that is, country)	of residence:  JAPAN	
This person is applicant all designated for the purposes of:	ed States except States of America	the United States the States indicated in the Supplemental Box	
Box No. III FURTHER APPLICANT(S) AND/OR (FURT			
Name and address: (Family name followed by given name; for a legal end the address must include postal code and name of country. The country of Box is the applicant's State (that is, country) of residence if no State of r	f the address indicated in this nce is indicated below.)	This person is:  applicant only  V applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office	
State (that is, country) of nationality:  JAPAN	State (that is, country,	of residence: JAPAN	
This person is applicant all designated all designated for the purposes of:	tied States except States of America	the United States of America only the States indicated in the Supplemental Box	
Further applicants and/or (further) inventors are indicated	l on a continuation sheet.		
Box No. IV AGENT OR COMMON REPRESENTATIVE	E; OR ADDRESS FOR	R CORRESPONDENCE	
The person identified below is hereby/has been appointed to ac of the applicant(s) before the competent International Authoriti	t on behalf les as:	agent common representative	
Name and address: (Family name followed by given name; for a legal e The address must include postal code and name of 12288 Attorney TSUNODA Yoshisue		Telephone No. 03-3343-5821	
Shinjuku Bldg., 8-1, Nishishinjuku 1-chome, Shinjuku-ku, TOKYO 160-0023 JAPAN		Facsimile No. 03-3348-2746	
		Teleprinter No.	
		Agent's registration No. with the Office	
Address for correspondence: Mark this check-box who space above is used instead to indicate a special address	ere no agent or common re to which correspondence	epresentative is/has been appointed and the should be sent.	

Box No. V	DESIGNATION OF STATES	Mark the applicable check-boxes below; a	t least one must be marked.
	ving designations are hereby made und	der Rule 4.9(a):	
Regional	Patent		C. L. S. C. C. C. C. C.
	SL Sierra Leone, SZ Swaziland, TZ U State which is a Contracting State of t specify on dotted line)	Gambia, KE Kenya, LS Lesotho, MW Minited Republic of Tanzania, UG Uganda, Zhithe Harare Protocol and of the PCT (if other	A Zambia, ZW Zimbabwe, and any other - kind of protection or treatment desired,
	RU Russian Federation, TJ Tajikistan Patent Convention and of the PCT	Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ n, TM Turkmenistan, and any other State wh	nich is a Contracting State of the Eurasian
	Republic, DE Germany, DK Denmar HU Hungary, IE Ireland, IT Italy, LU SI Slovenia, SK Slovakia, TR Turkey and of the PCT	elgium, BG Bulgaria, CH & LI Switzerland k, EE Estonia, ES Spain, FI Finland, FR Fi Luxembourg, MC Monaco, NL Netherlands, and any other State which is a Contracting	rance, GB United Kingdom, GR Creece, s., PT Portugal, RO Romania, SE Sweden, s., State of the European Patent Convention
	GA Gabon, GN Guinea, GQ Equato TD Chad, TG Togo, and any other St of protection or treatment desired, sp	Benin, CF Central African Republic, CG ( rial Guinea, GW Guinea-Bissau, ML Mali, rate which is a member State of OAPI and a ( pecify on dotted line)	MR Mauritania, NE Niger, SN Senegal, Contracting State of the PCT (if other kind
Nation	al Patent (if other kind of protection of	or treatment desired, specify on dotted line):	
□ AR	United Arab Emirates	☐ HIR Croatia	OM Oman
AG	Antigua and Barbuda	HU Hungary	☐ PG Papua New Guinea
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☐ AM	Armenia [		PL Poland
☐ AT	Austria	☐ IN India	PT Portugal
│ □ AŪ	Australia		RO Romania
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☐ BA	Bosnia and Herzegovina	KE Kenya	
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□BG	Bulgaria		☐ SD Sudan
☐ BR	Brazil	of Korea	
☐ BY	Belarus	☐ KR Republic of Korea	SG Singapore
☐ BZ	Belize	☐ KZ Kazakhstan	SK Slovakia
☐ CA	Canada	LC Saint Lucia	☐ SL Sierra Leone
☐ CE	& LI Switzerland and Liechtenstein	LK Sri Lanka	SY Syrian Arab Republic
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	Colombia	LS Lesotho	TM Turkmenistan
□ CI	Costa Rica	LT Lithuania	☐ TN Tunisia
□ ct	J Cuba	LU Luxembourg	☐ TR Turkey
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□ E	C Ecuador	MK The former Yugoslav Republic of	US United States of America
	E Estonia		
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	Finland	MWMalawi	. UVC Saint Vincent and the Grenadines
	B United Kingdom	MX Mexico	. UN Viet Nam
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G	Æ Georgia	. NI Nicaragua	ZA South Africa
	H Ghana	. NO Norway	☐ ZM Zambia
1	EM Gambia	NZ New Zealand	. D ZW Zimbabwe
		g States which have become party to the PCT	after issuance of this sheet:
			. 🗆
oths	r designations which would be permitt	ed under the PCT except any designation(s)  The applicant declares that those additional des	he applicant also makes under Rule 4.9(b) all indicated in the Supplemental Box as being signations are subject to confirmation and that
977	decimation which is not confirmed before	ore the expiration of 15 months from the prior	rity date is to be regarded as withdrawn by the
appl	icant at the expiration of that time limit.	(Confirmation (including fees) must reach the	receiving Office within the 15-month time limit.)

If the Supplemental Box is not used, this sheet should not be included in the request. Supplemental Box

- If, in any of the Boxes, except Boxes Nos. VIII(i) to (v) for which a special continuation box is provided, the space is insufficient to furnish all the information: in such case, write "Continuation of Box No..." (indicate the number of the Box) and furnish the information in the same manner as required according to the captions of the Box in which the space was insufficient, in particular:
  - (i) if more than two persons are to be indicated as applicants and/or inventors and no "continuation sheet" is available: in such case, write "Continuation of Bax No. III" and indicate for each additional person the same type of information as required in Box No. III. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below;
  - ii, in Bax No. II or in any of the sub-baxes of Bax No. III, the indication "the States indicated in the Supplemental Bax" is checked: in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the applicant(s) involved and next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is applicant,
  - (iii) if, in Box No. II or in any of the sub-boxes of Box No. III, the inventor or the inventor/applicant is not inventor for the purposes of all designated States or for the purposes of the United States of America: in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Box No. I of Baxes No. II and No. III" (as the case may be), indicate the name of the inventor(s) and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is inventor;
  - (iv) if, in addition to the agent(s) indicated in Box No. IV, there are further agents: in such case, write "Continuation of Box No. IV" and indicate for each further agent the same type of information as required in Box No. IV;
  - (v) if, in Box No. V, the name of any State (or OAPI) is accompanied by the indication "patent of addition," or "certificate of addition," or if, in Box No. V, the name of the United States of America is accompanied by an indication "continuation" or "confinuation-in-part": in such case, write "Continuation of Bax No. V" and the name of each State involved (or OAPI), and after the name of each such State (or OAPI), the number of the parent title or parent application and the date of grant of the parent title or filing of the parent application;
  - (vi) if, in Box No. VI, there are more than five earlier applications whose priority is claimed: in such case, write "Continuation of Box No. VI" and indicate for each additional earlier application the same type of information as required in Box No. VI
  - If, with regard to the precautionary designation statement contained in Box No.  $\hat{V}$ , the applicant wishes to exclude any State(s) from the scope of that statement: in such case, write Designation(s) excluded from precautionary designation statement" and indicate the name or two-letter code of each State so excluded

[Continuation of Box No. IV] 11351 Attorney ISOYAMA Hironobu Shinjuku Bldg., 8-1, Nishishinjuku 1-chome, 03-3343-5821 Shinjuku-ku, TOKYO 160-0023 JAPAN

Telephone No. Facsimile No. 03-3348-2746

Sheet	XT.		4	
Sheet	INO			

Box No. VI PRIORITY CLAIM					
The priority of the following earlier application(s) is hereby claimed:					
Filing date	Number	Where earlier application is:			
of earlier application (day/month/year)	of earlier application	national application: country or Member of WTO	regional application:* regional Office	international application: receiving Office	
item(1) January 8, 2003	P2003-002605	JAPAN	•		
item (2)					
item (3)					
item (4)					
			+		
item (5)					
	are indicated in the Suppleme				
The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office) identified above as:    all items   item (1)   item (2)   item (3)   item (4)   item (5)   Other, see Supplemental Box  * Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)):  Box No. VII INTERNATIONAL SEARCHING AUTHORITY  Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):					
ISA /J.P				• • • • • • • • • • • • • • • • • • • •	
Request to use results of e International Searching Aut	earlier search; reference to hority):				
Date (day/month/year)	Num	nber Con	intry (or regional Office)		
Box No. VIII DECLARA	ATIONS				
The following declarations are contained in Boxes Nos. VIII (i) to (v) (mark the applicable  Check-boxes below and indicate in the right column the number of each type of declaration):  Number of declarations					
Box No. VIII (i)	Declaration as to the iden	tity of the inventor		:	
Box No. VIII (ii)	Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent :				
Box No. VIII (iii)		Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application :			
Box No. VIII (iv)		Declaration of inventorship (only for the purposes of the designation of the United States of America) :			
Box No. VIII (v)	Declaration as to non-pro	ejudicial disclosures or ex	ceptions to lack of novel	lty :	

Sheet No. .....

Box No. IX CHECK LIST; LANGUAGE OF FILING						
This international application contains:	This international application is accompanied by the following	Number of items				
(a) in paper form, the following number of sheets:	item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):	of nems				
request (including	1.  fee calculation sheet	: 1				
declaration sheets) : 5	2.  original separate power of attorney	1				
description (excluding sequence listings and/or	3. original general power of attorney	: 1				
tables related thereto) : 14	4. ☑ copy of general power of attorney, reference number, if any:	: 2				
claims : 3	5. statement explaining lack of signature	: -				
abstract : 1 drawings : 6	6. 7 priority document(s) identified in Box No. VI as (1) item(s):	. 1				
Sub-total number of sheets: sequence listings: 29	7.  translation of international application into					
tables related thereto :	8. Separate indications concerning deposited microorganism					
(for both, actual mumber of sheets if filed in paper form, whether or not also filed in	or other biological material  9.  sequence listings in computer readable form					
computer readable form; see (c) below)	(indicate type and number of carriers)  (i) □ copy submitted for the purposes of international search in the purpose of internat	inder				
Total number of sheets : 29	Rule 13ter only (and not as part of the international appl  (ii) (only where check-box (b)(i) or (c)(i) is marked in left column	nn)				
(b) only in computer readable form (Section 801(a)(i))	additional copies including, where applicable, the copy purposes of international search under Rule 13ter	:				
(i) sequence listings (ii) tables related thereto	(iii) together with relevant statement as to the identity of the copies with the sequence listings mentioned in left column	nn :				
(c) also in computer readable form	10.  tables in computer readable form related to sequence listing (indicate type and number of carriers)	zs				
(Section 801(a)(ii)) (i) sequence listings	(i) copy submitted for the purposes of international search Section 802(b-quater) only (and not as part of the intern	under ational				
(ii) tables related thereto	application)	:				
CD-ROM, CD-R or other) on which are contained the						
sequence listings:						
tables related thereto:	copies with the tables mentioned in left column  11.  other (specify):					
(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)	11.  other (specify):					
Figure of the drawings which	Language of filing of the international amplication: Japanese					
should accompany the abstract:	international application: UAPATIESE  IT, AGENT OR COMMON REPRESENTATIVE					
Box No. X SIGNATURE OF APPLICAL Next to each signature, indicate the name of the person s	gning and the capacity in which the person signs (if such capacity is not obvious from	reading the request).				
TSU	NODA Yoshisue(Seal)					
. 150	YAMA Hironobu(Seal)	•				
150	INDA HITOHODA (SEAT)					
	For receiving Office use only	Drawings:				
<ol> <li>Date of actual receipt of the purported international application:</li> </ol>	2.	<b>_</b>				
2 Computed data of actual manint due to late	hut	received:				
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:						
4. Date of timely receipt of the required corrections under PCT Article 11(2):						
5. International Searching Authority (if two or more are competent): ISA / JP  6. Transmittal of search copy delayed until search fee is paid						
For International Bureau use only						
Date of receipt of the record copy by the International Bureau:						
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